



Student 1 Consent Calendar

National Conference of Family Medicine Residents and Medical Students
July 30 - August 1, 2015 – Kansas City, MO

1 **RECOMMENDATION: The Student 1 Reference Committee recommends the following**
2 **consent calendar for adoption:**

3
4 **Item 1:** Not Adopt Resolution No. S1-102 “Direct Primary Care Rotation Site List” (p. 1).

5
6 **Item 2:** Adopt Substitute Resolution No. S1-103 “Direct Primary Care CareerLink” (pp. 1-2).

7
8 **Item 3:** Adopt Substitute Resolution No. S1-105 “Support of Electronic Submission of
9 Resolution at National Conference 2016” (pp. 2-3).

10
11 **Item 4:** Adopt Substitute Resolution No. S1-106 “Increasing American Academy of Family
12 Physicians Leadership Pipelines” (p. 3).

13
14 **Item 5:** Adopt Substitute Resolution No. S1-107 “Adopt LGBT as a Standardized Acronym” (p.
15 4).

16
17 **Item 6:** Not Adopt Resolution No. S1-108 “Advocacy in Support of Safe Anti-Infective Drug
18 Development” (p. 4).

19
20 **Item 7:** Adopt Resolution No. S1-109 “Policy in Support of Safe Anti-Infective Drug
21 Development” (p. 5).

22
23 **Item 8:** Not Adopt Resolution No. S1-110 “Student Liaison to the Latino Medical Student
24 Association” (p. 5).

25
26 **REAFFIRMATION CALENDAR:**

27 (A) Resolution No. S1-101 “Continued National Conference Presentations of Alternative
28 Primary Care Models” (p. 6).

29 (B) Resolution No. S1-104 “Latino Medical Student Association-American Academy of
30 Family Physicians Liaison” (p. 6).



Student 1 Reference Committee Report

National Conference of Family Medicine Residents and Medical Students
July 30 - August 1, 2015 – Kansas City, MO

1 **The Student 1 Reference Committee has considered each of the items referred to it and**
2 **submits the following report. The committee's recommendations will be submitted as a**
3 **consent calendar and voted on in one vote. Any item or items may be extracted for**
4 **debate.**

5
6 **ITEM NO. 1: RESOLUTION NO. S1-102: DIRECT PRIMARY CARE ROTATION SITE LIST**

7
8 RESOLVED, That the American Academy of Family Physicians create an online list of
9 direct primary care clinics and physicians who are willing to allow residents and students
10 to rotate on site.

11
12 The reference committee heard testimony in favor of the resolution, specifically highlighting the
13 growing interest in Direct Primary Care (DPC) as an alternative practice model. The reference
14 committee acknowledged that it would be difficult to develop and keep a directory current. It was
15 noted that the AAFP has DPC toolkit resources available, including a consultation list of
16 practices and vendors that offer services related to starting a DPC practice. This could be one
17 source for identifying and contacting potential mentors. This list could be made available to
18 members on the AAFP website. Another resource for identifying opportunities to gain
19 experience in a DPC practice would be through the AAFP's Direct Primary Care Member
20 Interest Group (MIG). Students can network through the MIG's discussion forums to find
21 opportunities within their specific geographic area of interest.

22
23 **RECOMMENDATION: The reference committee recommends that Resolution No. S1-102**
24 **not be adopted.**

25
26 **ITEM NO. 2: RESOLUTION NO. S1-103: DIRECT PRIMARY CARE CAREER LINK**

27
28 RESOLVED, That the American Academy of Family Physicians include a category on
29 Career Link specifically designated for direct primary care job opportunities.

30
31 The reference committee heard testimony in favor of the resolution. The author of the resolution
32 stated that the AAFP should make it easy for members interested in practicing Direct Primary
33 Care (DPC) to easily search for job opportunities in this area. It would be particularly helpful for
34 graduating residents. The reference committee noted that the AAFP's job search service,
35 CareerLink, currently does not allow members to search for job openings by practice model.
36 The reference committee was unsure as to whether employers would be utilizing such a service
37 to recruit physicians to this type of practice. It was noted that any changes requested to
38 CareerLink would affect the overall platform of the service, which is licensed by organizations

39 other than the AAFP. The reference committee was in support of the AAFP consulting with
40 current members who are DPC subject matter experts to determine whether they consider
41 CareerLink as a viable resource to recruit physicians to this type of practice model. Based on
42 the feedback received from these members, the AAFP could determine whether to proceed with
43 exploring the modification of CareerLink.

44
45 **RECOMMENDATION: The reference committee recommends that Substitute Resolution**
46 **No. S1-103 be adopted in lieu of Substitute Resolution No. S1-103, which reads as**
47 **follows:**

48
49 **RESOLVED, That the American Academy of Family Physicians explore the**
50 **inclusion of a category on CareerLink specifically designated for direct primary**
51 **care job opportunities.**

52
53 **ITEM NO. 3: RESOLUTION NO. S1-105: SUPPORT OF ELECTRONIC SUBMISSION OF**
54 **RESOLUTIONS AT NATIONAL CONFERENCE 2016**

55
56 RESOLVED, That the American Academy of Family Physicians National Conference
57 utilize simple electronic submission forms on the member section of the aafp.org website
58 for all resolutions that can then be made available electronically two weeks prior to
59 National Conference 2016, and be it further

60
61 RESOLVED, That the reference committee reports from the National Conference of
62 Family Medical Residents and Medical Students be made available on the member
63 section of the aafp.org website during National Conference.

64
65 The reference committee heard testimony in support of the resolution. Several resolution
66 authors testified that there were errors made in their resolutions from submittal to presentation
67 on the reference committee agendas, both in grammar and style. The resolution author also
68 cited concerns with the environmental ramifications from the amount of paper used for
69 resolutions. There was mention of a similar resolution from last year and noted that nothing has
70 changed in the process.

71
72 The reference committee noted that reference committee reports are already made available on
73 the AAFP website during the conference. The reference committee believes that students would
74 not submit or access resolutions prior to the conference based on similar scenarios with the
75 National Conference of Constituency Leaders. In addition, the meeting is intended to be a
76 training ground for aspiring leaders, and the ability to write and submit resolutions on site is
77 important to this development. Resolutions may be submitted in advance of the meeting, if
78 members so choose, given that the documents are available online, though this option has
79 never been utilized.

80
81 Reference committee discussion centered on efficiencies and time savings for the onsite
82 submission process for resolutions. The reference committee believed that resolutions should
83 be accepted electronically, including but not limited to flash drive and email submission, as
84 opposed to hard copy. This would prevent staff from having to retype each resolution and
85 potentially avoid errors. Resolutions submitted via email would require that the author check in
86 with staff on site to ensure its receipt and to sign the appropriate resolution form.

87

88 **RECOMMENDATION: The reference committee recommends that Substitute Resolution**
89 **No. S1-105 be adopted in lieu of Substitute Resolution No. S1-105, which reads as**
90 **follows:**

91
92 **RESOLVED, That the American Academy of Family Physicians utilize electronic**
93 **submission methods for all resolutions submitted to the 2016 National Congress**
94 **of Family Medicine Residents and National Congress of Student Members.**

95
96 **ITEM NO. 4: RESOLUTION NO. S1-106: INCREASING AMERICAN ACADEMY OF FAMILY**
97 **PHYSICIANS LEADERSHIP PIPELINES**

98
99 RESOLVED, That the American Academy of Family Physicians offer a leadership
100 workshop at its National Conference of Family Medicine Residents and Medical
101 Students for students and residents interested in exploring leadership roles, and be it
102 further

103
104 RESOLVED, That the American Academy of Family Physicians increase the
105 dissemination of publicity materials before the National Conference of Family Medicine
106 Residents and Medical Students that promote student and resident members to join
107 commissions, reference committees, and run for local delegate and national level
108 positions, and be it further

109
110 RESOLVED, That the American Academy of Family Physicians also offer a leadership
111 workshop at its National Conference of Family Medicine Residents and Medical
112 Students for under-represented populations.

113
114 The reference committee heard testimony in support of the resolution. While there are many
115 leadership opportunities at the National Conference of Family Medicine Residents and Medical
116 Students, many attendees are unaware of how easy it is to get involved and would benefit from
117 more exposure to information about these opportunities. The reference committee noted that
118 the AAFP publicizes leadership opportunities in many ways, including on the AAFP website, in
119 the student and resident e-newsletters, through the Family Medicine Interest Group (FMIG)
120 network, and through AAFP chapters, and faculty. An informational video of current AAFP
121 student and resident leaders sharing their experiences was also released via email to
122 encourage students and residents to pursue leadership opportunities. The reference committee
123 noted that the number of student and resident leadership position applicants has steadily
124 increased since 2013, demonstrating the effectiveness of the AAFP's communication efforts.
125 The reference committee believed there was value in including information about student and
126 resident leadership opportunities in the first-time attendee orientation session at the National
127 Conference of Family Medicine Residents and Medical Students.

128
129 **RECOMMENDATION: The reference committee recommends that Substitute Resolution**
130 **No. S1-106 be adopted in lieu of Substitute Resolution No. S1-106, which reads as**
131 **follows:**

132
133 **RESOLVED, That the American Academy of Family Physicians include information**
134 **on leadership opportunities at the first-time attendee orientation for the National**
135 **Conference of Family Medicine Residents and Medical Students.**

139 **ITEM NO. 5: RESOLUTION NO. S1-107: ADOPT LGBT AS A STANDARDIZED ACRONYM**

140
141 RESOLVED, That the American Academy of Family Physicians (AAFP) shall adopt the
142 unified terminology 'LGBT' as the abbreviation for the lesbian, gay, bisexual, and
143 transgender community at all levels of the organization by updating all AAFP documents.
144

145 The reference committee heard testimony in support of the resolution. The author made note
146 that the commonly accepted acronym for the community is LGBT as opposed to GLBT,
147 currently used by the AAFP. Additional testimony indicated that the revision to the acronym
148 should also include 'Q' for queer.
149

150 The reference committee believed that it would be good for the AAFP to be consistent with other
151 organizations as far as reordering the acronym. They also believed that adding the 'Q' would be
152 a step toward further inclusivity with the constituency.
153

154 **RECOMMENDATION: The reference committee recommends that Substitute Resolution**
155 **No. S1-107 be adopted in lieu of Substitute Resolution No. S1-107, which reads as**
156 **follows:**
157

158 **RESOLVED, That the American Academy of Family Physicians (AAFP) use the**
159 **terminology 'LGBTQ' as the abbreviation for the lesbian, gay, bisexual,**
160 **transgender, and queer community at all levels of the organization.**
161

162 **ITEM NO. 6: RESOLUTION NO. S1-108: ADVOCACY IN SUPPORT OF SAFE ANTI-**
163 **INFECTIVE DRUG DEVELOPMENT**
164

165 RESOLVED, That the American Academy of Family Physicians support ensuring strong
166 Food and Drug Administration standards for approval of new antibiotic and antifungal
167 agents including superiority trials, and be it further
168

169 RESOLVED, That the American Academy of Family Physicians lobby federal legislators
170 to oppose the passage of any bill or elements of a bill that would induce the Food and
171 Drug Administration to alter its anti-infective drug approval process so that it relies upon
172 data obtained from non-inferiority trials or surrogate non-clinical endpoints rather than
173 clinical outcomes of randomized controlled trials in humans demonstrating superiority of
174 novel drugs versus comparator drugs.
175

176 The reference committee heard testimony from the author asking that the AAFP lobby federal
177 legislators to oppose the passage of any bill or elements of a bill that would result in the Food
178 and Drug Administration altering its anti-infective drug approval process. The reference
179 committee recognized the significance of this issue; however, it was noted that the AAFP should
180 first develop a policy addressing the approval process for anti-infective drugs before lobbying
181 federal legislators for support.
182

183 **RECOMMENDATION: The reference committee recommends that Resolution No. S1-108**
184 **not be adopted.**
185
186
187
188

189 **ITEM NO. 7: RESOLUTION NO. S1-109: POLICY IN SUPPORT OF SAFE ANTI-INFECTIVE**
190 **DRUG DEVELOPMENT**

191
192 RESOLVED, That the American Academy of Family Physicians support ensuring strong
193 Food and Drug Administration standards for approval of new antibiotic and antifungal
194 agents including superiority trials, and be it further

195
196 RESOLVED, That the American Academy of Family Physicians develop a policy that the
197 Food and Drug Administration’s antibiotic approval process rely upon the clinical
198 outcomes of randomized controlled trails in humans demonstrating superiority of novel
199 drugs versus comparator drugs rather than data obtained from non-inferiority trials or
200 surrogate non-clinical endpoints.

201
202 The reference committee heard limited testimony in favor of the resolution asking that the AAFP
203 support strong Food and Drug Administration standards for approval of new antibiotic and
204 antifungal agents and develop a policy related to this approval process. The reference
205 committee applauded the intent of the resolution and agreed that because the AAFP currently
206 does not have a policy on this issue, one should be developed.

207
208 **RECOMMENDATION: The reference committee recommends that Resolution No. S1-109**
209 **be adopted.**

210
211 **ITEM NO. 8: RESOLUTION NO. S1-110: STUDENT LIAISON TO THE LATINO MEDICAL**
212 **STUDENT ASSOCIATION**

213
214 RESOLVED, That the American Academy of Family Physicians create an elected
215 position titled “Student Liaison to the Latino Medical Student Association” with the same
216 duties and responsibilities as the Student Liaison to the Student National Medical
217 Association.

218
219 The reference committee heard testimony in favor of the resolution. Testimony noted that the
220 Latino population is the fastest growing demographic in the United States and that the AAFP
221 should be actively engaged in conversations with underrepresented groups such as this, similar
222 to that with the Student National Medical Association (SNMA).

223
224 The reference committee believes this resolved clause is already being addressed by
225 Resolution S1-104 and did mention that this would be an appointed position similar to that of the
226 SNMA liaison, not elected.

227
228 **RECOMMENDATION: The reference committee recommends that Resolution No. S1-110**
229 **not be adopted.**

230
231 **REAFFIRMATION CALENDAR**

232 The following items A and B are presented by the Reference Committee on the Reaffirmation
233 Calendar. Testimony in the Reference Committee hearing and discussion by the Reference
234 Committee in Executive Session concurred that the resolutions presented in Items A and B are
235 current policy or are already addressed in current projects. At the request of the National
236 Congress of Student Members, any item may be taken off the Reaffirmation Calendar for an

237 individual vote on that item. Otherwise, the Committee will request approval of the Reaffirmation
238 Calendar in single vote.

239
240 (A) Resolution No. S1-101 entitled, "Continued National Conference Presentations of
241 Alternative Primary Care Models," the resolved portion which reads as printed below:
242

243 RESOLVED, The American Academy of Family Physicians continue to present new,
244 innovative, and alternative primary care provider practice models at the National
245 Conference of Family Medicine Residents and Medical Students.
246

247 The reference committee heard testimony from the author in favor of the resolution. The AAFP
248 has already begun to offer programming on new, innovative, and alternative primary care
249 practice models at the National Conference of Family Medicine Residents and Medical
250 Students. Additional testimony noted that a call for session proposals is currently distributed
251 primarily to academic settings. Staff will investigate the feasibility of doing a wider call for
252 session proposals to potentially reach various practice model providers, including but not limited
253 to the Member Interest Group-Direct Primary Care.
254

255 (B) Resolution No. S1-104 entitled, "Latino Medical Student Association-American Academy
256 of Family Physicians Liaison," the resolved portion which reads as printed below:
257

258 RESOLVED, That the American Academy of Family Physicians (AAFP) and provide to
259 its membership the status of the potential collaboration between Latino Medical Student
260 Association (LMSA) and family medicine interest groups and the creation of a LMSA-
261 AAFP liaison.
262

263 The reference committee heard testimony from the author in favor of the resolution. Testimony
264 made reference to Resolution No. S1-100 from the 2013 National Congress of Student
265 Members asking for a liaison to the Latino Medical Student Association (LMSA) and stated that
266 there seems to have been no progress on this effort. The author requested an update on current
267 status.
268

269 The AAFP Commission on Education's Subcommittee on Resident and Student Issues agreed
270 with the 2013 resolution with modification to explore creation of an LMSA-AAFP liaison and to
271 explore family medicine interest group collaboration with LMSA chapters in community
272 development activities. Since this resolution was adopted, the AAFP has increased its support
273 of LMSA, which is part of the process of vetting additional opportunities with the organization.
274 For the first time this year, the AAFP sponsored the LMSA National Conference and sent staff to
275 the conference to attend, learn about the organization, and exhibit to students there. LMSA
276 does not provide much information on its website (size of the organization, membership make-
277 up, etc.), so attending the conference was one way to learn about the organization, its
278 members, its goals, and its current initiatives. The reference committee believed this is
279 necessary to determine the right kind of collaboration moving forward.
280

281 Staff will also investigate the feasibility of including an article with a status update on the
282 creation of an LMSA liaison position in the student e-newsletter and a potential update on the
283 topic through the national FMIG coordinator.
284

285 **RECOMMENDATION: The Reference Committee recommends that Items A and B on the**
286 **Reaffirmation Calendar be approved as current policy or as already being addressed in**
287 **current projects.**

288

289 **I wish to thank those who appeared before the reference committee to give testimony**
290 **and the reference committee members for their invaluable assistance. I also wish to**
291 **commend the AAFP staff for their help in the preparation of this report.**

292 Respectfully submitted,

293

294

295

296

Lauren Abdul Majeed, Chair

297

298 Peter Ali

299 Aaron Ferro

300 Jessica Fortin

301 Netana Hotimsky

302 Mary Elizabeth Littrell

303 Cooper Nickel